TAXPAYER'S GUIDE TO LOCAL PROPERTY TAX EXEMPTIONS

COMMUNITY PRESERVATION ACT (CPA) SURCHARGE

The Board of Assessors has created this fact sheet to provide general information about local property tax exemptions. It is not designed to address all questions or issues and does not change any provision of the Massachusetts General Laws. To find out about the specific eligibility and application requirements in Arlington, you should contact the Assessors' Office. Property taxes are assessed and collected by cities and towns. Under state law, only your Board of Assessors, as the local tax administrator, can decide whether you qualify for an exemption. If you disagree with its decision, you may appeal to the state Appellate Tax Board.

INTRODUCTION

Cities and towns may give property tax exemptions to some individuals as defined by state law. An exemption discharges a taxpayer from the legal obligation to pay all or a part of the tax assessed for the fiscal year. Exemptions are found in various clauses of Massachusetts General Laws Chapter 59, Section 5 (M.G.L. c. 59, § 5).

The CPA surcharge was adopted by Arlington voters on November 4, 2014 and began funding in FY 2016. The Town of Arlington began collecting surcharge revenue on the August 3, 2015 real estate tax bills and continues collection on a quarterly basis. The Act establishes a dedicated funding source to enable the Town to:

- Acquire or preserve open space
- Rehabilitate or create local parks, playgrounds & athletic fields
- Preserve or restore historic resources & artifacts
- Help meet local families' housing needs

The vote approved a 1.5% surcharge on the net property taxes, with the following exemptions:

- \$100,000 of the value of each taxable parcel of residential real property
- Property owned and occupied as a domicile by any person who qualifies for the low income CPA exemption.
- Property owned and occupied as a domicile by any senior (60+) who qualifies for the low or moderate income CPA exemption.
- \$100,000 of value of each taxable parcel of class 3, commercial property and class 4, industrial property as defined in section 2A of said Chapter 59.

EXEMPTION	Total Exemption from CPA Surcharge.
AMOUNT	The CPA surcharge is a 1.5% surcharge on your net taxes, after \$100,000 has
	been reduced from the assessed value.
	Formula of calculating CPA Surcharge ((Assessed Value-\$100,000) x (Tax Rate÷1000) x 1.5%)
	Example using FY 2022 average single family home value & tax rate
	((844,658-100,000) x (11.42÷1000) x 1.5%) = \$127.56 total CPA surcharge for year

	1								
APPLICATIONS	You must file an application for each fiscal year with the Assessors Office. The application is due April 1, or three months after the actual tax bills are mailed, whichever is later. Filing on time is required. By law, the Assessors may not waive this filing deadline, nor act on a late application, for any reason. Filing an application does not entitle you to delay your tax payment.								
DOCUMENTATION	You must provide the Assessors with whatever information is reasonably required to establish your eligibility. This information may include, but is not limited to: 1. Birth certificates. 2. Evidence of ownership, domicile and occupancy. 3. Income tax returns.								
NUMBER OF EXEMPTIONS	Unlike most other exemptions, the CPA surcharge exemption, may be combined with the other exemptions. For seniors filing Clause 41A, tax deferral, the CPA surcharge cannot be deferred. It would either need to be paid or exempted.								
ELIGIBILITY REQUIREMENTS	You must satisfy tests relating to domicile, ownership, occupancy, annual income and in some cases age. You must meet all eligibility requirements as of January 1 of the preceding year. If you do not meet all requirements as of January 1, you cannot receive all or any portion of the exemption for that tax year.								
OWNERSHIP AND DOMICILE	You must own and occupy the property as your domicile. Your domicile is where your principal and legal home is located, your family, civic and economic life is centered and you plan to return whenever you are away. You may have more than one residence, but only one domicile. 1. If you hold a life estate in the domicile, you are the owner. 2. If your domicile is held in a trust, you are the owner only if: a) You are a trustee or co-trustee of that trust, and b) You have a sufficient beneficial interest in the domicile.								
INCOME LIMITS	Your income (gross receipts) for the previous calendar year cannot exceed a specified limit, depending on your age and household size.								
	Household Size Annual Income Limit for the CPA Exemption Senior Household Type: Property Owned by Senior (60+) Non-Senior Household Type: Property Owned by Non-Senior (<60)								
	1	\$104,230	\$83,384						
	2 \$119,120 \$95,296								
	3	\$134,010	\$107,208						
	4 \$148,900 \$119,120 5 \$160,812 \$128,650								
	6 \$172,724 \$138,179								
	7 \$184,636 \$147,709								
	8 \$196,548 \$157,238								
	These income limits are adjusted for household size and are based on the FY2024 median income published by HUD.								

INCOME LIMITS continued	Gross receipts means income from all sources and is broader than taxable income for federal or state income tax purposes. When determining annual household income, all household members who are 18 or older and not full time students during the previous calendar year are included. Income includes but is not limited to, wages, salaries and bonuses, public and private pensions, retirement income, Social Security, alimony, child support, interest and dividend income, net income from business or property rental, public assistance, disability and unemployment insurance, regular contributions/gifts.
DEDUCTIONS	Deduct allowance for Dependants, number of dependants on January 1 (not including spouse) x \$300. Deduct (certain) Medical Expenses. Total out of pocket medical expenses of all household members for the preceding calendar year, (total must exceed 3% of household annual gross income in order to be deducted). Out of pockets medical expenses must be documented and includes: health insurance premiums, payments to doctors, hospitals and other health care providers, diagnostic tests, prescription drugs, medical equipment or other expenses not paid or reimbursed by employers, public or private insurers or other third parties.
EXEMPTION CREDIT	If the Assessors decide you are eligible and grant an exemption, the amount granted is credited toward and reduces the tax outstanding on your domicile for the fiscal year. You will not receive a refund unless you have already paid the entire year's tax at the time the exemption is granted.
SALE OF DOMICILE	If you are selling your domicile, you should make your attorney aware that you receive a property tax exemptions that reduces the tax owed for the fiscal year. The sale is a private financial transaction and as a party, you are responsible for seeing that the exemption is properly credited at the closing, through escrow or other arrangements, when the parties make adjustments for local property taxes or charges. Your city or town is not responsible for seeing that you and the buyer allocate the property taxes so you get benefit of the exemption.
	APPEALS
Appellate Tax Board	The Appellate Tax Board (ATB) is an independent, quasi-judicial state board that hears taxpayer appeals from local Assessors' decisions on property tax abatements and exemptions. ATB decisions may be appealed to the Appeals Court and, ultimately, to the Supreme Judicial Court. You can obtain the ATB's guide to the property tax appeal process from its website (www.mass.gov/atb) or by calling 617-727-3100.
Appeal of Action of Assessors Appeal of Action	You have 3 months from the date of the Assessors' decision on your exemption application to appeal to the ATB. This includes decisions to deny any exemptions or to grant an exemption that provides a lesser benefit. If the application was deemed denied, your appeal must be filed within 3 months of the deemed denied date. As a general rule, if the real estate tax on your domicile is over \$5,000, you must also have paid all preliminary and actual tax installments on time for the ATB to hear your appeal. The Assessors may grant the exemption or higher the exemption in the final settlement of your application during the 3 month period for filing an appeal. In that case, you do not have to have filed an appeal with the ATB. However, if a

of Assessors continued	settlement is not reached and an exemption not granted during that period, you must have filed your appeal by the deadline. If not, the ATB cannot hear the
	appeal.

	ASSESSMENT AND EXEMPTION CALENDAR
January 1	Property Tax Assessment Date for Next Fiscal Year CPA Exemption Eligibility Date for Fiscal Year
July 1	Fiscal Year Begins All other Real Estate Exemption Eligibility Date for Fiscal Year
December	Actual Tax Bills Mailed for Fiscal Year
February 1 (Quarterly Payment Communities)	First Actual Installment Payment Due
April 1 or 3 Calendar Months from Mailing of Actual Tax Bill if later	Personal Exemptions Applications to Assessors Due
3 Calendar Months from Filing of Application (or Date of Written Extension Given by Taxpayer)	Board of Assessors Grant or Deny Exemption Application Deemed Denied if Board of Assessors Have Not Acted
3 Calendar Months Assessors' Action on Application, or Deemed Denial of Application	Appeal to ATB Due

For more information, including exemption applications, please contact the Assessors' Office arlingtonma.gov/assessors assessors@town.arlington.ma.us (781) 316-3050

ARLINGTON MASSACHUSETTS

OFFICE OF THE BOARD OF ASSESSORS

Robbins Memorial Town Hall 730 Massachusetts Ave. Arlington, MA 02476

P: 781.316.3050 email: assessors@town.arlington.ma.us

www.arlingtonma.gov

Community Preservation Act (CPA) Surcharge Exemption

Qualifications

- Applicant must own and occupy property as their domicile as of January 1, 2024.
- Properties held in Trust; applicant must be a trustee and have a beneficial interest.
- Annual household income¹, less deductions² for dependents and certain medical expenses², must be at or below the annual limit listed in chart below.

Household	Annual Income Limit for the CPA exemption							
Size	Senior Household Type: Property Owned by Senior (60+)	Non-Senior Household Type: Property Owned by Non-Senior (<60)						
1	\$104,230	\$83,384						
2	\$119,120	\$95,296						
3	\$134,010	\$107,208						
4	\$148,900	\$119,120						
5	\$160,812	\$128,650						
6	\$172,724	\$138,179						
7	\$184,636	\$147,709						
8	\$196,548	\$157,238						

Theses income limits are adjusted for household size and are based on the 2024 area median income published by HUD (\$148,900)

Instructions

- A new application is required each year.
- Please complete this application with the same accuracy as you would your income tax return.
- The 2025 application filing deadline is APRIL 1, 2025. This deadline cannot be extended or waived by the Board of Assessors for any reason. It is best to apply as early as possible.

Include copies of supporting income documentation. Include a copy of the 2023 Federal Tax
return* and supporting schedules for applicant and all members of the household, who are 18
years of age or older and not a full-time student.
New applicants filing as a Senior, must include a copy of a driver's license, birth certificate, or
passport for proof of age.

If your home is held in a Trust, please provide the most current copy of the Trust document an	ıd
amendments, including any schedules. If you have not previously provided them.	

Submit your application to the Office of the Board of Assessors via mail, drop box (located in
parking lot adjacent to Town Hall) or in person. You will be contacted by mail if additional
documentation is required.

* If you do not file a Federal Income Tax Return, please contact the Assessors' Office.

¹ Income (gross receipts) means income from all sources and is broader than taxable income for federal or state income tax purposes. Income includes but is not limited to; salary, wages, social security, rental income, interest, dividends, distributions, pensions and all other retirement benefits.

Community Preservation Act (CPA) Surcharge Exemption continued

² Deductions

Allowance for Dependents.

 Number of dependents on January 1 (not including spouse) x \$300 (Established by the State Department of Housing and Community Development, 760 Code of Massachusetts Regulations 6.05(4)).

Medical Expenses (certain)

- Total out of pocket medical expenses of all household members for the preceding calendar year, (total must exceed 3% of household annual gross income in order to be deducted).
- Out of pocket medical expenses must be documented and includes: health insurance premiums, payments to doctors, hospitals and other health care providers, diagnostic test, prescription drugs, medical equipment or other expenses not paid or reimbursed by employers, public/private insurers or other third parties.

After deductions, Income cannot exceed the Annual Limits for Household Type and Size (see chart on page 1).



Completed on behalf of Applicant by

OFFICE OF THE BOARD OF ASSESSORS

Robbins Memorial Town Hall 730 Massachusetts Ave. Arlington, MA 02476

P: 781.316.3050 email: <u>assessors@town.arlington.ma.us</u> www.arlingtonma.gov

LOW INCOME PERSONS & LOW OR MODERATE INCOME SENIORS 2025 APPLICATION FOR COMMUNITY PRESERVATION ACT SURCHARGE EXEMPTION M.G.L. Chapter 44B

This application is not open to public inspection.

This application is not open to public inspection.										
FILING PROCEDURE- See instructions										
The 2025 filing deadline is April 1, 2025. It is best to file as early as possible. The deadline cannot be extended or waived by the Board of Assessors for any reason, Applications received after April 1, 2025 will be deemed denied. You will be contacted by mail regarding any additional documentation needed to process your application.										
APPLICANT INF										
Include applicant	t, spoi	use, co-owner (s) in the home as of .	Janua	ary 1,	2024					
		Name First, Middle Initial, Last			Relationship to Applicant		e of B		M	larital Status
					APPLICANT					
Applicant Address										
as of July 1, 2023	3	Street Address			Town	_		State Zip Code		Zip Code
Applicant Contaction	ct		<u> </u>							
		Home Phone			Mobile Phone			Email	Addr	ress
Contact Person, other than										
above (optional)		I give my permission to release information to the above-named individual		Relationship			ne Numb	er of	f Contact Person	
									_	
Is the ownership	of the	e property in a trust as of January 1,	2024′	? YE	S NO					
If yes, please inc] abulc	Declaration of Trust and all schedule	s, unl	less y	ou previously prov	ided the	em.			
Have you applied for this year? YE		or been granted a real estate exempt NO	ion in	any o	other city or town,	in Mass	achu	setts or	an	y other State,
•					\$					
		If yes, name of City/Town & State					Amo	ount exem	npter	d
SIGNATURE.	Sign to	o complete the application								
This application has been prepared and examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, this application and all accompanying documents and statements are true, correct, and complete. I also understand that failure to cooperate with any review of my eligibility may cause the application to be denied.										
Арр	olicant S	Signature Date		Spouse	e/Co-Owner Signature (i	if living in t	he hom	ie)		Date

Relationship

Date

Signature

HOUSEHOLD MEMBERS List all members of your household as of January 1, 2024 and provide requested information.								
If you are a household of ONE, please check here $lacksquare$ and continue to next section								
Full Name Relationship to Age as of Occupation or (First, Middle, Last) Relationship to Applicant 1/1 School Grade								
1.								
2.								
3.								
4.								
5.								
6.								
Continue list on attachment, in same format, as necessary.								

HOUSEHOLD OUT OF POCKET MEDICAL EXEPENSES DURING CALENDAR YEAR 2023.

List total medical expenses incurred by all household members during the calendar year before January 1 that were not paid by or reimbursed by employer, public or private health insurance or other third party. Includes amount paid in health insurance premiums, copayments, deductibles and other out of pocket expenses. Documentation is required to verify expanses claimed

PLEASE NOTE: If your income from calendar year 2023 is below the guideline amount listed on the instructions, you can skip this section. Please continue to next page.

TYPE OF EXPENSE	Total Out of Pocket for Preceding Calendar Year
Health Insurance Premiums	\$
Doctors	\$
Hospitals	\$
Diagnostic Tests	\$
Prescription Drugs	\$
Medical Equipment	\$
Other	\$
TOTAL OUT OF POCKET	\$

FILING THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR SURCHARGE.
TO AVOID INTEREST AND COLLECTION CHARGES, YOU MUST PAY SURCHARGE AS BILLED BY DUE DATE.
IF EXEMPTION IS GRANTED AND SURCHARGE IS PAID IN FULL A REFUND WILL BE MADE.

HOUSEHOLD GROSS INCOME FOR CALENDAR 2023. List income received from <u>all</u> sources for each member of the household 18 and older and not full-time student during calendar year before January 1. Please list members in same order as shown in Section C on previous page. Copies of Federal income tax returns and other documentation are <u>required</u> to verify income reported for each household member.

PLEASE NOTE: All applicants **MUST** complete this section. Providing income tax return forms is not sufficient. **C3**Do not write see attached, same as last year or NA. Incomplete applications will be returned to you.

	Applicant Name	Member 1 Name	Member 2 Name	Member 3 Name
TYPE OF INCOME				
Wages, Salaries, other compensation	\$	\$	\$	\$
Social Security benefits	\$	\$	\$	\$
Other pensions/ retirement benefits	\$	\$	\$	\$
Interest/ dividends	\$	\$	\$	\$
Rental Income	\$	\$	\$	\$
Net profits from business or profession	\$	\$	\$	\$
Capital gains (losses)	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Public assistance	\$	\$	\$	\$
Unemployment compensation	\$	\$	\$	\$
Disability compensation	\$	\$	\$	\$
VA benefits	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
TOTAL GROSS INCOME	\$	\$	\$	\$
TOTAL GROSS INCOME for HOUSEHOLD				\$

Continue list on attachment, in same format, as necessary.

F. CO-OWNERS' HOUSEHOLD GROSS INCOME DURING CALENDAR YEAR 2023.

Does Section E above include the gross income of all owners* of the property as of January 1, 2024? Yes No

If no, please contact the Assessors' Office for further instruction.

^{*}Income from all owners of the property, whether they live at the property or not, is required to determine eligibility.